TOWN OF AMHERST – DESIGN REVIEW BOARD DESIGN REVIEW APPLICATION

	For Office Use Only	
Applicant(s)	Application #	_
Address	Filing Date	_
Address	Response Deadline	_
	Decision/Date	_
Telephone/email		
Owner (if other than applicant)	Designer/Architect/Consultant	
Address	Address	
Telephone/email	Telephone/email	
Amendment to previously granted per	rmit ves no	-
	•	
Associated permit applications (Site Pl	an Review, Special Permit, other)	_
	(s)	-
Zoning District(s)		-
Existing land use and classification nun	nber (Zoning Bylaw section 3.3):	-
Proposed land use and classification n	umber:	
		-

DESIGN REVIEW APPLICATI	ON
Request for Waiver	
A waiver is requested under Section for request:	n 3.2033 of the Amherst Zoning Bylaw. Indicate reason(s)
Signature of Applicant(s)	Signature of property owner(s) - optional

PLEASE NOTE : The Town of Amhers Zoning Bylaw Section 3.2 Design Roused for reference in completing a	t – Design Review Board Rules and Regulations (attached) and eview (available at the Planning Department office) should be pplications.
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PLA	ANNING DEPT. OFFICE USE ONLY
Received by the Planning Dept. on	Date
Received by:	
Signature)
	w application fee. Checks or money orders should be made out to the Town Hall Central Desk along with a completed Planning

epartment receipt foi